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OR							
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as attorney	(s) or agent(s) to represent the	undersianed before th	ne I Inited States	Patent and Tradem	ark Office I	(USPTO) in conn	oction with
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Assignee Name and Address:							
ilumisys, Inc.							
1820 East Big Beaver Road							
Troy, Michigan 48083-2031							
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be							
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SIGNATURE of Assignee of Record							
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature				****	Date	March 9, 3	2012
Name	David L. Símon				Telephon	e 248-614-24	00 ext. 332
Title	President						

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